

## Texas Department of Criminal Justice



# STEP 1

## OFFENDER GRIEVANCE FORM

## OFFICE USE ONLY

Grievance #: 2014119678  
 Date Received: 3-31-14  
 Date Due: 5-10-14  
 Grievance Code: 660  
 Investigator ID #: 10646  
 Extension Date: \_\_\_\_\_  
 Date Retd to Offender: APR 15 2014

Offender Name: Bobby E. Burton Jr. TDCJ # 836846  
 Unit: Coffield Housing Assignment: I118  
 Unit where incident occurred: Coffield

You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing.

Who did you talk to (name, title)? Unknown Officer When? 03-17-14  
 What was their response? I'm going to let his door open so he can kick your ass.  
 What action was taken? Walked off.

State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate

The inmate told me he would come out and kick my ass when the night officer work. I fear for my life. Officer said when the time is right ~~he~~ will get my door open while I'm on run in handcuffs.

2014

Action Requested to resolve your Complaint.

(To File a OPE) MAR 31 2014

Offender Signature: Bobby C. BurtDate: 03-31-14

Grievance Response:

Your allegations of life endangerment couldn't be substantiated due to a lack of evidence to support your claims.

Signature Authority: L. DoyleDate: 4/15/14

If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Investigator within 15 days from the date of the Step 1 response. State the reason for appeal on the Step 2 Form.

Returned because: \*Resubmit this form when the corrections are made.

- ☐ 1. Grievable time period has expired.
- ☐ 2. Submission in excess of 1 every 7 days. \*
- ☐ 3. Originals not submitted. \*
- ☐ 4. Inappropriate/Excessive attachments. \*
- ☐ 5. No documented attempt at informal resolution. \*
- ☐ 6. No requested relief is stated. \*
- ☐ 7. Malicious use of vulgar, indecent, or physically threatening language. \*
- ☐ 8. The issue presented is not grievable.
- ☐ 9. Redundant, Refer to grievance # \_\_\_\_\_
- ☐ 10. Illegible/Incomprehensible. \*
- ☐ 11. Inappropriate. \*

JGI Printed Name/Signature: \_\_\_\_\_

Application of the screening criteria for this grievance is not expected to adversely affect the offender's health.

Medical Signature Authority: \_\_\_\_\_

**OFFICE USE ONLY**

Initial Submission UGI Initials: \_\_\_\_\_

Grievance #: \_\_\_\_\_

Screening Criteria Used: \_\_\_\_\_

Date Recd from Offender: \_\_\_\_\_

Date Returned to Offender: \_\_\_\_\_

2<sup>nd</sup> Submission UGI Initials: \_\_\_\_\_

Grievance #: \_\_\_\_\_

Screening Criteria Used: \_\_\_\_\_

Date Recd from Offender: \_\_\_\_\_

Date Returned to Offender: \_\_\_\_\_

3<sup>rd</sup> Submission UGI Initials: \_\_\_\_\_

Grievance #: \_\_\_\_\_

Screening Criteria Used: \_\_\_\_\_

Date Recd from Offender: \_\_\_\_\_

Date Returned to Offender: \_\_\_\_\_



## Texas Department of Criminal Justice

## STEP 2

OFFENDER  
GRIEVANCE FORM

Offender Name: Bobby E. Burton Jr. TDCJ # 836846  
 Unit: Coffield Housing Assignment: I-118 I-117  
 Unit where incident occurred: Coffield

## OFFICE USE ONLY

Grievance #: 2014119678  
 UGI Recd Date: APR 18 2014  
 HQ Recd Date: APR 24 2014  
 Date Due: 5-23  
 Grievance Code: 000  
 Investigator ID#: X144  
 Extension Date: \_\_\_\_\_

You must attach the completed Step 1 Grievance that has been signed by the Warden for your Step 2 appeal to be accepted. You may not appeal to Step 2 with a Step 1 that has been returned unprocessed.

Give reason for appeal (Be Specific). I am dissatisfied with the response at Step 1 because...

I don't feel comfortable or safe here. my life is in danger here?

Offender Signature:

Bobby E. Burton Jr.

Date:

04-17-14

Grievance Response:

You were appropriately advised at the Step I level. The Coffield Unit Classification Committee reviewed your allegations on 4/2/14 and indicated no action as your claims could not be substantiated. Your Step II did not contain any additional information that would warrant a subsequent review. Should you be able to provide information to corroborate you allegations, you are encouraged to contact security, Classification, and/or Administration for immediate assistance. There is no indication that the Coffield Administration has failed to address your safety concerns.

Signature Authority:

Howard B. Howard ARS

Date:

05-13-14Returned because: *\*Resubmit this form when corrections are made.*

- ☐ 1. Grievable time period has expired.
- ☐ 2. Illegible/Incomprehensible.\*
- ☐ 3. Originals not submitted.\*
- ☐ 4. Inappropriate/Excessive attachments.\*
- ☐ 5. Malicious use of vulgar, indecent, or physically threatening language.
- ☐ 6. Inappropriate.\*

CGO Staff Signature: \_\_\_\_\_

**OFFICE USE ONLY****Initial Submission**

CGO Initials: \_\_\_\_\_

Date UGI Recd: \_\_\_\_\_

Date CGO Recd: \_\_\_\_\_

(check one) ☐ Screened ☐ Improperly Submitted

Comments: \_\_\_\_\_

Date Returned to Offender: \_\_\_\_\_

**2<sup>nd</sup> Submission**

CGO Initials: \_\_\_\_\_

Date UGI Recd: \_\_\_\_\_

Date CGO Recd: \_\_\_\_\_

(check one) ☐ Screened ☐ Improperly Submitted

Comments: \_\_\_\_\_

Date Returned to Offender: \_\_\_\_\_

**3<sup>rd</sup> Submission**

CGO Initials: \_\_\_\_\_

Date UGI Recd: \_\_\_\_\_

Date CGO Recd: \_\_\_\_\_

(check one) ☐ Screened ☐ Improperly Submitted

Comments: \_\_\_\_\_

Date Returned to Offender: \_\_\_\_\_